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FEC FORM

STATEMENT OF ORGANIZATION

RECEIVED

2012 FEB -6 AM 8: 36

FEC MAIL CENTER

10111111				FEC MAIL CEN
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Fitrakis for Cong	ress	<u> </u>		
ADDRESS (number and street)	1021 E. Broad	d St.		
(Check if address is changed)	Columbus		OH	43205
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-	-mail address)		
(Check if address	<u>lfitrakisforcong</u>	gress@gmail.co	om.	
is changed)		<u> </u>		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
(Check if address		<u> </u>		
is changed)				
2. DATE 01 [™] ′ 27	2012			
3. FEC IDENTIFICATION NU	JMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treasurer	Suzanne M. I	Patzer		
Signature of Treasurer	Puguneth.	Poten	Date 01	27 2012
NOTE: Submission of false, errone	ous, or incomplete information of			the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

	FEC F	orm 1 (Revised 02/2009)	Page 2	
TYPE OF COMMITTEE				
Ce	ndidat	e Committee:		
(a)	\boxtimes	This committee is a principal campaign committee. (Complete the candidate information below.)		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate	
	ne of didate	Robert J. Fitrakis		
	didate y Affiliat	tion GR Office Sought: House Senate President	State OH District 03	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	ne of didate			
Par	ty Cor	mmittee:		
(d)			emocratic, publican, etc.) Party.	
Pol	itical A	Action Committee (PAC):		
(e)	\Box	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:	
		Corporation Corporation w/o Capital Stock	abor Organization	
			Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party	
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint Fundraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political	
Committees Participating in Joint Fundraiser				
			• • • • •	
	1.			
	2.	FEC ID pumber.		
	3.	FEC ID number C		
	4.	FEC ID number		

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FEC Form 1 (Revise Write or Type Committee Na		Page 3
Fitrakis for Cor		
	1 Organization, Affiliated Committee, Joint Fundraising Representative, or	l eadership PAC Sponsor
6. Name of Any Conflected	organization, Anniated Committee, John Fundraising Representative, or	Leadership PAC Sporisor
Mailing Address		
-		
		 -
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	dentify by name, address (phone number optional) and position of the person	on in possession of committee
Full Name Suza	anne M. Patzer	
Mailing Address	1021 E. Broad St.	
	Columbus	43205
Title or Position	CITY STATE	ZIP CODE
T		
Treasurer	Telephone number 614,	
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and assistant treasurer).	d the name and address of
Full Name SUZE	anne M. Patzer	
Mailing Address	1021 E. Broad St.	
		<u> </u>
	Columbus OH STATE	43205 zip code
Title or Position	1614.	- 374, - 2448
	Telephone number	المستناتات المستناسا

FEC Form 1	I (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		111111111
		<u> </u>
	CITY STATE	ZIP CODE
Title or Position	CITY STATE	ZIP CODE
	Telephone number	<u> </u>
safety deposit boxes Name of Bank, Dep	·	osits funds, holds accounts, rents
safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. FIFTH, THIRD BANK	esits funds, holds accounts, rents
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safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. FIFTH, THIRD BANK, 2,570, EAST, MAIN ST.	J. 4.3.2.0.9.
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Federal Election Cor ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this filing	R INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked //36/1
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Sig	nature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registratio	Date of Receipt n Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Shy	2/4/12
PREPARER (3/2005)	DÁTÉ PREPARED
• *	